



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4504

<b>SERIAL NUMBER</b> 10/510,014	<b>FILING OR 371(c) DATE</b> 04/11/2005 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> ARS-103
<b>APPLICANTS</b> Amanda Proudfoot, Chens Sur Leman, FRANCE; Marie Kosco-Vilbois, Minzier, FRANCE; Timothy Wells, Prevessin Moens, FRANCE;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP03/50084 03/31/2003 <i>8/30/06 BOH</i>				
<b>** FOREIGN APPLICATIONS *****</b> EUROPEAN PATENT OFFICE (EPO) 02100339.7 04/04/2002 <i>BOH 8/30/06</i>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Boh D. 9/1/06</i> Acknowledged <i>BOH</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 7
				<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 23557				
<b>TITLE</b> Chemokines mutants having improved oral bioavailability				
<b>FILING FEE RECEIVED</b> 1186	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	